								ŀ	Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003									10728035				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OF SMALL ENTITY		
T	DTAL CLAIMS	<u> </u>	9				l	RATE	FE		RATE	FEE ·	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE 385.	00 OF	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			^Q \ minus 20≈		٠ ا			XS 9		OR	XS18=		
INDEPENDENT CLAIMS			2 minus 3 =		.0			X43=		OR	. X86=	·	
M	ATIPLE DEPEN	NOENT CLAIM PI	RESENT					+145		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	mu		
3	Column 1) (Column 2) (Column 3)							SMAL	L ENTIT		OTHER SMALL	THAN	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADD TION/ FEE	IL.	RATE	ADDI- TIONAL FEE	
Ē	Total	. 9	Minus	- 2	<u> </u>	- /		XS 9=		OR	X\$18=		
A SE	Independent ·	<u>.</u>	Minus		3	-/-		X43=	17	OR	X86=		
	PREST PRESE	NTATION OF MU	JUNPLE DE	PENDENT	CLAIM	<u> </u>	۱ <u>۱</u>	+145=	1/	OR	+290=	1	
•								YOY/		OR	YOYAL ADDIT FEE		
(Column 1) (Column 2) (Column 3)											700m. r c.c.y		
AMENDMENT B	8/10/07	CLAIMS REMAINING AFTER AMENDMENT	٠.	HIGH NUME PREVIO PAID I	ER USLY	PRESENT EXTRA		RATE	ADDI TIONA FEE		RATE	ADDI- TIONAL FEE	
	Total -	. 8	Minus	-20	9	•/		X\$ 9•	1.	OR	X\$18=	·	
AME	Encepandent			- S	•		X43=	1	OR	X86=			
ш	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						' [+145s		OR	+290=		
								TOYA		OR	YOTAL ADDIT, FEE		
(Column 1). (Column 2) (Column 3)												·	
AMENDMENT C	8/30/07	CLAIMS REMAINING AFTER AMENDMENT		FREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONA FEE	L	RATE	ADDI/ TIOXAL PEE	
30%	Total		Minus	17/1	0	- /		X\$ 9=		OR	X\$18=		
¥	indep adent	MTATION OF MU	Marin C	ENDERE		-/	[X43=		OR	X86#		
								+145=		OR	•290=		
* If the entry in column 1 is less than the entry in column 2, write 'V' in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter 20.													
	I the Tighest Nur	moor Previously Paid ber Previously Paid	id For' DI THE	S SPACE IS	less that	L enter "L"	-4						
	•	•							•		•	I	

FORM PTO-473 (Res. 1003)